



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)  
PHRM0023-100  
(00204regUS)

In re Application of Peter Lind et al.

Application Number 09/841,741

Filed April 25, 2001

For NOVEL G PROTEIN-COUPLED RECEPTORS

Group Art Unit  
1646

Examiner  
John D. Ulm

RECEIVED  
AUG 25 2003  
TECH CENTER 1600/2900

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |   |       |
|---|-------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$110 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))           | \$    |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))         | \$    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))          | \$    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))          | \$    |

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ \_\_\_\_\_.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-1275.
- I have enclosed a duplicate copy of this sheet.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a): 52,201.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

August 18, 2003

Date

Signature

Daniel M. Scolnick

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.